



**CANDIDATE'S STATEMENT OF ORGANIZATION AND
DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE**

(CFA-1)

State Form 4604 (R13/9-10)

Indiana Election Commission (IC 3-9-1-3; IC 3-9-1-4; IC 3-9-1-5)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK. SEE INSTRUCTIONS ON REVERSE SIDE.

FILE NUMBER

1. IS THIS AN AMENDMENT? ☒ No ☐ Yes If Yes, please enter the file number in this box →

SECTION A. CANDIDATE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.

2. Last Name Barker		First Name Frances		Middle Name Dannell	Nickname	3. Type of Committee (Check one) <input checked="" type="checkbox"/> Candidate's Principal Committee <input type="checkbox"/> Exploratory Committee	
4. Mailing Address 3669 N. Colorado Ave				5. FAX (Optional)		6. E-mail Address (Optional)	
7. City Indianapolis	State IN	ZIP Code 46218	8. County Marrison	9. Telephone (Day) (317) 545-9636		10. Telephone (Evening) (317) 545-9636	
11. Party Affiliation <input checked="" type="checkbox"/> Democratic <input type="checkbox"/> Libertarian <input type="checkbox"/> Republican <input type="checkbox"/> Other				12. Office Sought (Include district number, if any. Not required for an exploratory committee.) Common Council Board District # 4			

SECTION B. COMMITTEE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.

13. Full Name of Committee (Do not abbreviate) <input type="checkbox"/> Check if this is a new name							
14. Mailing Address <input type="checkbox"/> Check if this is a new address 3669 N. Colorado Ave.				15. FAX (Optional)		16. E-mail Address (Optional)	
17. City Indpls.	State IN	ZIP Code 46218	18. County Marrison	19. Telephone (317) 545-9636		20. Committee Organization Date (MM-DD-YY) 01-07-16	
21. Chairperson's Full Name <input checked="" type="checkbox"/> Designate Candidate as Chairperson <input type="checkbox"/> Check if this is a new chairperson Frances D. Barker							
22. Mailing Address <input type="checkbox"/> Check if this is a new address 3669 N. Colorado Ave				23. FAX (Optional)		24. E-mail Address (Optional)	
25. City Indpls.	State IN	ZIP Code 46218	26. County Marrison	27. Telephone (Day) (317) 545-9636		28. Telephone (Evening) (317) 545-9636	
29. Bank or Other Depositories (List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.) IMCU							
30. Exploratory Committee (Give brief statement explaining purpose of an exploratory committee only.)				31. Salaries and Reimbursements (Will the committee pay the candidate a salary or reimbursement for lost wages? If Yes, attach a copy of the contract.) <input type="checkbox"/> No <input type="checkbox"/> Yes			

SECTION C. APPOINTMENT OF TREASURER (IC 3-9-1-14)

32. I, as Chairperson of the foregoing committee, appoint the following person as Treasurer of the Committee. Frances Barker				Signature of the Committee Chairperson Frances Barker			
33. Treasurer's Full Name <input type="checkbox"/> Designate candidate as treasurer <input type="checkbox"/> Check if this is a new treasurer Frances Dannell Barker							
34. Mailing Address <input type="checkbox"/> Check if this is a new address 3669 N. Colorado Ave.				35. FAX (Optional)		36. E-mail Address (Optional)	
37. City Indpls.	State IN	ZIP Code 46218	38. County Marrison	39. Telephone (Day) (317) 545-9636		40. Telephone (Evening) (317) 545-9636	

SECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)

41. I give notice that I accept the duties and responsibilities of Treasurer of this Committee. I am not the chairperson of a campaign finance committee (except as permitted for a candidate committee under IC 3-9-1-7).		Signature of Person Accepting Appointment Frances Barker
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SECTION E. CERTIFICATION OF STATEMENT

We certify as the candidate and the duly appointed Chairperson of the Committee and that we have examined this statement. To the best of our knowledge and belief it is true, correct and complete.

42. Typed or Printed Name of Chairperson Frances D. Barker	Signature of Chairperson Frances Barker	Date (MM-DD-YY) 01-07-16
43. Typed or Printed Name of Candidate Frances D. Barker	Signature of Candidate Frances Barker	Date (MM-DD-YY) 01-07-16

Warning: State law requires that any change in this information be reported within 10 days of the change (IC 3-9-1-10). A person who knowingly files a fraudulent report commits a Class D felony (IC 3-14-1-13). A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor (IC 3-14-1-14), and may be subject to civil penalties (IC 3-9-4-16, IC 3-9-4-17, and IC 3-9-4-18).

FOR OFFICE USE ONLY

Myla A. Eldridge

JAN 07 2016

FILED